

Chairperson
Iowa Board of Medical Examiners
1209 East Court Avenue
Des Moines, IA 50319-0180

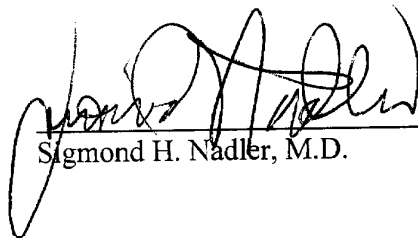
LETTER OF INTENT

Dear Chairperson:

You are hereby notified that in accordance with the provisions of section 148.8, of the Code of Iowa (1997), this letter shall constitute my written statement of intention to voluntarily surrender the enclosed Iowa medical license, number 15801.

You are further notified that I fully understand that upon the Board's acceptance of this voluntary surrender of my medical license, I may no longer engage in the practice of medicine and surgery as a physician in the State of Iowa and I hereby absolve and release the Iowa Board of Medical Examiners from any further right, claim, or title to the enclosed certificate of license, and to any of the rights, privileges and honors pertaining thereto. This document is a public record and pursuant to federal law must be reported to the National Practitioner Data Bank.

This written statement of my intention to voluntarily surrender my medical license is being signed by me on this 23rd day of March, 1999, as my own voluntary act and deed.


Sigmund H. Nadler, M.D.

WITNESS:

